

# In My Flesh: Fabricating The Bulimic Body

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## Abstract

My MFA exhibition *In My Flesh*, explores my own personal experience of an eating disorder: bulimia nervosa, through the medium of sculpture and installation. Situated in the Fine Art Sculpture and Painting building on Rhodes University campus, this practical submission takes the form of a multi-sensory installation depicting the fleshy interior of a bulimic body. The sculptural works that make up the installation resemble enlarged bodily forms and cavities, namely the mouth; the oesophagus, the stomach; the intestines; and the flesh. These anatomical forms are made from fabric which has been melted, manipulated, and stained using food and other synthetic dyes. The arrangement of the sculptural components (parts of the body affected by bulimia) does not mirror the human body exactly, and their intentionally disordered placement creates a feeling of dis-ease and disturbance for the participant experiencing the installation.

This mini-thesis, *In My Flesh: Fabricating the Bulimic Body*, unpacks the visual, tactile and audio elements of this practice as research submission as they relate to my interest in bodily boundaries, corporeal traces and material extensions. I look at these themes as they translate into installation, and discuss the way in which bulimia is experienced, theorised and represented. I position my work in relation to the concept of the abject as proposed by Julia Kristeva, and visually analyse artworks by Mona Hatoum, Heidi Bucher and Ernesto Neto who make use of immersive installation strategies that resonate with my own practice. This supporting document considers the three conceptual elements informing my installation: embodiment, space, and materiality. In the first chapter of this document: *Embodying the Bulimic Body*, I address bulimia as less open to visual interpretations than other eating disorders because of its secretive and hidden nature. I go on to frame the illness in relation to theories around bodily boundaries and abjection and argue that bulimia epitomises abjection. In Chapter Two: *Architecture of the Bulimic Body* I engage with the idea of architectural structures as having anatomic features. I interrogate how the body moves through space, leaving traces of itself behind. Chapter Three: *Fabricating the Bulimic Body* concentrates on the main medium used in *In My Flesh*: fabric. In my discussion of this material, I unpack its metaphoric and symbolic qualities, as well as its personal resonance with my own lived experience.

## **Declaration of Originality**

I declare that this thesis is my own work and that all the sources I have used have been acknowledged by complete bibliographic references. This thesis is being submitted in partial fulfilment of the requirement for Master of Fine Art at Rhodes University. I declare that it has not been submitted before for any other degree or examination at another university.

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Ashley Hodgson

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## Introduction

In my Master of Fine Art submission titled: *In My Flesh*, I represent my personal experience with bulimia in the form of an embodied experiential installation. Situated within the stairwell and hidden room of the Fine Art Sculpture and Painting building on Rhodes University campus, this exhibition takes the form of an immersive installation presented as the fleshy interior of a bulimic body. The fabricated body contains various enlarged body parts, such as the mouth (fig. 1), the oesophagus (fig. 2), the stomach (fig. 3), and intestines (fig. 4), which signify the parts of the body that are affected by bulimia. The installation is made from melted synthetic fabrics that drape across and fold over the architectural surfaces of the space. To achieve a flesh-like feel, the fabric is melted. High heat directly applied to synthetic material causes it to bubble and warp, mimicking the surface texture of flesh (fig. 5). The fabric has been dyed using a mixture of synthetic store-bought fabric dyes, as well as home-made, using foods such as beetroot and turmeric. The fleshy tones that I mimic appear on the ‘inside’ of the mouth, the ear, the throat, the vagina and the anus for example. These are body parts that can be considered entry and exit points into the body. Echoed in the tunnels and cavities of the installation are gurgling, beating and rumbling bodily sounds and upon entering, participants are immersed in the processes of the internal body.

During my five-year battle with bulimia, I was consumed by images of thin, sometimes emaciated women. In popular culture this extreme slender look has been glamorised. Many written accounts and much research has focused on anorexia, with bulimia and compulsive eating briefly mentioned or described as “sub-type[s] of anorexia” (Squire, 2003: 17)<sup>1</sup>. Unlike anorexia and compulsive eating which make clear visual statements of either extreme thinness or obesity, bulimia is much more ambiguous and camouflaged as one is still able to maintain a ‘normal’ weight range. I have come to understand bulimia as an internal embodied experience that cannot be fully and accurately depicted through purely visual methods.

The exhibition title *In My Flesh*, is partly informed by the book *The Prosthetic Pedagogy of Art: Embodied research and practice* where Charles R. Garoian (2013) describes the notion of ‘art-in-the-flesh’ as the ultimate embodiment of a lived experience. He conceptualises this notion as not only referring to the literal flesh of the body, but also material extensions and

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<sup>1</sup> Examples of this include Catherine Garrett’s *Beyond Anorexia* (1998), Peggy Claude-Pierre’s *The Secret Language of Eating Disorders* (1997), and Susie Orbach’s *Hunger Strike* (1986).

prosthetics of the body as integral to communicating and understanding an experience (Garoian, 2013: ). I further unpack this idea of the artwork as a prosthesis, in Chapter Three. In using the art medium of installation to immerse the participant within the bulimic body that I have ‘fabricated’, *In My Flesh* aims to aid understanding and promote sensitivity towards the topic of bulimia.

This mini thesis, titled *In My Flesh: Fabricating the Bulimic Body*, provides an in-depth analysis of the practical and conceptual evolution of the sculptural pieces that make up my installation *In My Flesh*. In this document, I position my work in relation to feminist perspectives on eating disorders, and more specifically Julia Kristeva’s (1982; 2001) theories around “abjection”. In order to contextualize my own practice within the contemporary art landscape, I visually analyse the strategies and techniques used in select works by three different artists, namely Mona Hatoum, Heidi Bucher, and Ernesto Neto as they inform my own practical development as an artist specializing in experiential and immersive installation. I go on to examine my own artwork by detailing the threads that tie the body to the material/physical world. My own experience with bulimia, as it pertains to my practice, is situated in relation to the above-mentioned artworks by Hatoum, Bucher, and Neto. This document focuses on three main elements of my practice as research, and the chapters are divided accordingly: Chapter 1: *Embodying the Bulimic Body*, Chapter 2: *Architecture of The Bulimic Body*, and Chapter 3: *Fabricating the Bulimic Body*.

In the first chapter, *Embodying the Bulimic Body*, I discuss the nature of bulimia and the secretive and hidden quality that surrounds it. Drawing on theories from Susan Bordo (1993, 2012), Suzie Orbach (1986, 2009) and Kim Chernin (1985), I situate this disorder within a particular cultural context using theories of cultural inscription as proposed by Elizabeth Grosz (1994), while relating it to the issues pertaining to the misrepresentation of bulimia. I move on to describe the immersive strategies that I have adopted in order to create an experiential environment. My use of sound and texture is integral to creating sculptural representations of a “profoundly physical body” (Squire, 2003: 23). Central to the understanding of my practice is Julia Kristeva’s notion of ‘the abject’ and ‘abjection’. Kristeva defines the abject as “one of those dark revolts of being, directed against a threat that seems to emanate from an exorbitant outside or inside, ejected beyond the scope of the possible, the tolerable, the thinkable” (1941:1). In this chapter, I consider the idea of bulimia as ‘the epitome of abjection’ by exploring it as an illness that involves the constant transgression of the body’s boundaries. In

the article *Anorexia and Bulimia: Purity and Danger*, Squire (2003) asserts that the bulimic body is not romanticised in the way that the anorexic body is. She explains that the bulimic body provokes “repulsion” and “horror” because it supposedly signifies that one is out of “control” (2003: 20). I go on to analyse the installation *Corpse Étranger* (1994). In this immersive piece, Mona Hatoum strips the body of its borders by filming her insides using an endoscopic camera. Hatoum adopts immersive strategies (such as sound) to depict a body being undone and taken apart (Arya, 2014: 14). By traversing the borders of the body in this way, Hatoum’s practice evokes Kristeva’s notion of the abject.

In the second chapter, *Architecture of the Bulimic Body*, I contextualise my practical submission by discussing the site in which it is installed. *In My Flesh* transforms the architectural features of the stairway and fire exit into anatomical features. In the discussion of my own work and experience, I consider ways in which a building exists as an embodied space, that reflects the experiences of the individuals who inhabit it. I elaborate on the connection between the body, space, movement and architecture as discussed by Henri Lefebvre and Juhani Pallasmaa. In *The Eyes of The Skin: Architecture and the senses* Pallasmaa clarifies that “...understanding architectural scale implies the unconscious measuring of the object or the building with one’s body, and of projecting one’s body scheme into the space in question”(2012:71).

I go on to examine Heidi Bucher’s method of creating “room skins” as a way of preserving/fossilizing experiences and traces of individuals who have moved through a particular space. In relation to Bucher’s works, I discuss my own practical method of metaphorically ‘draping’ and ‘clothing’ a room or space with my own personal experiences.

Chapter Three *Fabricating The Bulimic Body*, considers the medium and method that is used to create my practical submission, namely fabric and heat. I examine the ways in which fabric can be seen figuratively as threads that connect the body to the outer world like a ‘prosthesis’ (Grosz, 2012:1). Consulting theories by Brian Massumi and Garoian, I explore the concept of physical/material objects as prosthetic extensions of the body, which I use to justify the use of material in my practical submission. I elaborate on my personal connection with sewing and fabric as a handicraft that has been passed down in my family, and explain my relationship to fabric in the form of clothing as a form of ‘security blanket’ during my battle with bulimia. In the article ‘Threading Women’, Maureen Daly Goggin argues that “needlework became gendered under modernity; that is, it was constructed as “women’s work” (2012:2). I further

discuss eating disorders being typically associated with women as a social construction and inscription. Sarah Squire (2002: 24) points out that “the lived bulimic body is not an individual construction but is developed within certain habitats, habitats which are gendered, raced, and classed”.

In this chapter, I analyse Ernesto Neto’s multi-sensory installation *Anthropodino* (2009) exhibited at the Park Avenue Armory in New York. This work is explored in relation to the 1960’s Brazilian literary and art movement *Tropicália*, aimed to “transplant Europe beyond its borders” (Siewierski, 2007: 500). I consider Neto’s installation as a construction of a new world as a space which transgresses common societal beliefs. I also discuss the artists use of multi-sensory tactics and methods as they relate to my own methods for creating an immersive installation.



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Fig 5: Ashley Hodgson, *Flesh/Wall* (2020), sculptural installation (detail), fabric, dye, paint, varnish, dimensions variable, photography by Ashley Hodgson.

# Chapter 1: Embodying the Bulimic Body

Feminist theorists such as Susan Bordo<sup>2</sup> (1993, 2012), Suzie Orbach<sup>3</sup> (1986, 2009) and Kim Chernin (1985) suggest that disordered eating is frequently discussed in terms of its visual manifestations and responses to a particular cultural context and less in terms of individual pathologies. According to Burns (2004:270) self-starvation is described as a reaction to a Western culture that values slenderness as a feminine ideal, and binge eating is considered the consequence of extreme dieting (Burns, 2004:270). These approaches treat the body as a surface inscribed with “central rules”, “hierarchies” and “metaphysical commitments” (Bordo, 1993:165). Squire notes that theorists “tend to take visual images—such as photographic advertisements” (2003:18) as their evidence. While there is increasingly more attention being afforded to eating disorders, feminist narratives and visual representations dedicate little focus to bulimia (Burns, 2004; Squire 2003). In this chapter I argue that this is because bulimia is less open to visual readings and explain how I have used multi-sensory elements in my installation as a way to represent an ‘invisible’ illness.

## 1.1. A deeply embodied experience

### 1.1.1. The profoundly lived body

My understanding of bulimia as an illness is defined by acts that are kept hidden from public view and its symptoms remain largely invisible. The desire to somehow depict this hidden, secretive, abject experience inspired me to construct an installation that reproduces different elements of the internal bulimic body. Squire (2003:23) elaborates on the practice of ‘binging and purging’ as deeply embodied and in tune with all the body’s senses, describing the bulimic body as a “profoundly lived body”. She states:

To experience bulimia is to inhabit an intensely physical body, a body which is constantly expanding and contracting, effecting a change between one’s self and the world. In the act of bingeing and purging, the body’s integrity is ruptured, and the illusion of self-containment shattered. To experience bingeing, to feel one’s stomach distend, and to induce vomiting is to inhabit a profoundly lived body. (2003: 23)

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<sup>2</sup> In *Unbearable Weight: Feminism, Western Culture, and the Body*, Bordo (1993: 167) describes “our contemporary aesthetic ideal... [as]” as “central to the torment of many women’s lives”.

<sup>3</sup> Orbach (1986:10 ) mentions in *Hunger Strike: The Anorectic's Struggle as a Metaphor for our Age* that eating disorders extend from a “pressure to be attractive, to make their bodies conform to the designated ideal of the day, to be slender, tall, blonde, curvaceous, slim-hipped, round-bottomed, or pointed-breasted”.

Bulimia nervosa, which makes up one-third of the “holy trinity”(Squire, 2003:18) of eating disorders<sup>4</sup>, is an habitual act involving uncontrollable bouts of binge eating, purging, an obsession over weight, and a lot of laxatives (Pettersen, Rosenvinge, Ytterhus, 2008:205). In my own case, binge eating became a way of trying to fill emotional voids and purging a way of expelling emotional pain and gaining control. Bulimic activities are accompanied by feelings of shame and disgust and are often performed in solitude and privacy. Bulimia could also be said to be the exemplification of the common saying “do not judge a book by its cover”. In her brief description of bulimia, Orbach describes bingeing and purging habits as: “encapsulated experiences, ink blobs on a handwritten page. They mar an otherwise perfect looking copy book. They are dark and messy expressions of an inner turmoil she cannot eradicate” (1986: xiv).

While anorexia<sup>5</sup> and binge-eating<sup>6</sup> produce images of either extreme weight loss or “adiposity” (Orbach, 2009:9), bulimia makes less of a visual statement as physical and outer symptoms are limited, and one is still able to maintain ‘a normal weight range’. Internally however, frequent bingeing, purging and other compensatory methods scar the flesh, organs, and internal functioning of the body. Some consequences include eroding teeth, perforations to the oesophagus, as well as disruptions to intestines and functioning of the stomach (Anderson, Shaw, & McCargar, 1997:452).

Given the very hidden and ‘messy’ nature of bulimia, it is not as easily translated into a sympathetic or pleasing image. Anorexia on the other hand has been taken up by feminists as “unconscious feminist protest, involving anger at the limitations of the traditional female role” (Bordo, 1993:156). With imagery and references centred around the anorexic body, those with bulimia often strive to achieve the perceived ideals linked to anorexia. I believed that I had not lost enough weight because “I thought I was not ill enough”. According to Pettersen, Rosenvinge and Ytterhus (2008:207), this is a typical expression adopted by bulimic patients.

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<sup>4</sup> *Feeding and Eating Disorders: DSM-5® Selections* (2016: ix) classifies the three main types of eating disorders in adolescents and adults as anorexia nervosa, bulimia nervosa, and binge-eating disorder.

<sup>5</sup> The *DSM-5 Fifth Edition* (2013: 338) defines anorexia as “restriction of energy intake leading to significantly low body-weight”.

<sup>6</sup> Binge-eating disorder is also defined in the *DSM-5 Fifth Addition* (2013: 351) as “recurrent episodes of binge-eating [that]occurs in normal-weight/overweight and obese individuals”.

### 1.1.2. A multi-sensory approach

Sensory experiences are the height or “the very constitution” of human existence and “lived experience<sup>7</sup>” (Pallasmaa, 2012: 44). While sight is generally positioned as the most primary sense, experiences that engage multiple senses are central to establishing an understanding one’s sense of self (Lee, 2019:7). When one is born and visual perception is initially limited, the senses of smell, touch and hearing help an infant to find a place in the world and in themselves (Lee, 2019:7). Because we share sensory perceptions, it may also be used as a way to connect different understandings of individual realities and experiences.

Bulimia is a deeply multi-sensory experience: feeling the back of your throat with your index finger, feeling your previous meal make its way up your oesophagus, filling your mouth, trying to muffle the gagging sounds so that your family or friends won’t hear you, and smelling your half-digested food as it hits the water of the toilet bowl. In order to create a space that embodies the experience of bulimia, I have chosen to create a multi-sensory immersive installation that activates all the senses through visual, tactile and audio elements.

I have incorporated various sounds of eating, heart beats, dripping, and stomach rumbling and growling sounds that are echoed through multiple hidden speakers in the space. The various body parts such as the mouth and the intestines are filled with a mixture of shredded paper and polystyrene which create a ruffled noise upon contact and movement.

My installation uses the physical attributes of the space to construct my installation (I elaborate on this point in Chapter Two). Explaining the significance and relevance of architecture to one’s sensory experiences, Pallasmaa notes that architectural structures serve as multi-sensory hubs:

Every touching experience of architecture is multi-sensory; qualities of space, matter and scale are measured equally by the eye, ear, nose, skin, tongue, skeleton and muscle. Architecture strengthens the existential experience, one’s sense of being in the world, and this is essentially a strengthened experience of self. Instead of mere vision, or the five classical senses, architecture involves several realms of sensory experience which interact and fuse into each other. (2012:45)

Linked to this, the fabric I have used to sculpt the flesh and organs of my installation, also holds multiple sensory values as one is able to see, feel, smell and perhaps even hear its differing

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<sup>7</sup> In *Eyes of the Skin: Architecture and the senses*, Juhani Pallasmaa (2012:30) describes a lived experience as “fused” with “vision and the tactile sense”.

material composition. The fabric contains multiple textures: rough, smooth, squishy, and slimy that reflect the textures of the interior of the body. Certain smells may also be evident in the exhibition as I have dyed the fabric using dyes made from various foods such as beetroot or coffee. As a substance that we wear and touch, fabric is a familiar medium with many interpretations and associations.

The installation is tactile, and one is encouraged to use all one's senses: to listen to, smell and touch the fabricated interior of the body. When one enters the exhibition, they become completely immersed and merged with the bulimic experience as we touch, feel, hear, smell and see the world through our entire body.

## 1.2. The epitome of abjection

### 1.2.1. The ugly sister

Central to *In My Flesh* and this supporting document is the concept of the abject and abjection. In *Powers of Horror: An Essay on Abjection*, Julia Kristeva<sup>8</sup> (1982:4) defines abjection as the feeling of horror towards a threatened breakdown in “identity, system, order”. The abject is neither subject, nor object and its only definitive quality is “that of being opposed to I” (Kristeva, 1982:2). While it is a complex and pervasive cultural concept that relates to all aspects of culture, social systems, religion, gender, and race, I am particularly interested in its connection to the body, food, and bodily boundaries. Excretions and bodily fluids such as vomit, blood, urine, and faeces are seen as simultaneously separate from the body whilst also belonging to the body. Kristeva elaborates:

Contrary to what enters the mouth and nourishes, what goes out of the body, out of its pores and openings, points to the infinitude of the body proper and gives rise to abjection. Fecal matter signifies, as it were, what never ceases to separate from a body in a state of permanent loss in order to become autonomous, distinct from the mixtures, alterations, and decay that run through it. That is the price the body must pay if it is to become clean and proper. (1982:108)

Historically, the body has been closed off, contained, and any “corporeal traces” washed away in order to fit social ideals “for what is permissible in ‘civilised’ society” (Arya, 2014:62). Although natural, in order to achieve the “body proper”, one must disassociate and abject these excretions. Bodily fluids stand as a threat to the body and to society not only because they are

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<sup>8</sup> While the concept of the abject has been theorised by many authors, Kristeva’s take is seen as the most prominent conceptualisation of the term.

considered contaminants, but because they are a fluid and sticky reminder of what one cannot control or contain (Kristeva, 1982:4). The concept of the abject, particularly pertaining to the body, is concerned with notions of the inside/outside. Excretions transgress the borders of the body, uncontrollably falling beyond what Kristeva, describes as the “order of [her] condition as a living being” (1982:3).

Eating disorders are frequently discussed in terms of control: anorexia is identified as an act where one practices the willpower to overcome and control the needs of the body (Bordo, 1993:174). Bulimia on the other hand is considered the result of one succumbing to the body and its cravings for food and is thus associated with a lack of self-control (Squire, 2004:21). In this sense, bulimia epitomises abjection as it threatens the boundaries of the body through bingeing and purging. Squire elaborates:

The threatening nature of bulimia can be located in the fluidity (of the body’s boundary, of the contours of the self) produced by the practice of bulimia, a fluidity that disgusts and threatens not only because it is fluid but because it is a fluid that seeps and clings. The process of redrawing and reordering one’s boundaries is not clear cut, and the threat of touching this symbolic boundary seems to be one which pervades all responses to, and representations of, bulimia. (2003:22)

In *Volatile Bodies: Towards a Corporeal Feminism*, Elizabeth Grosz discusses the notion of “cultural inscription” (1994) as a form of control and containment. Grosz describes bodies as “raw materials” (ibid: 170) that are, from birth, inscribed with a cultural text: the ideals, norms, and abjected other which categorize bodies into “socially significant groups—male and female, black and white, and so on” (ibid: 142). Also deemed “the ugly sister” (Squire, 2004:17), bulimia disrupts the cultural inscriptions of ‘femininity’ that surround food and eating as it does not coincide with ‘light eating’ that is inscribed as the appropriate ‘feminine’ response towards food (Burns, 2004:271; Hornbacher, 1999:153). Its immersion within the body and deeply embodied practice also does not coincide with the “mind/body” dualism that usually dictates discussion of the body (Grosz, 1994: 27): the mind, which anorexia signifies, is privileged, and separated from the corporeal and uncontrollable functioning of the body (Grosz, 1994:3). According to Tillman succumbing to the body's cravings, is perceived as characteristic of “indulgence and greed” (2009: 100).

Terming processes or subjects as “abject” is a socially constructed way of controlling and containing bodies into clean and ordered beings (Butler, 1999:2004). Little focus has been afforded to the representation and discussion of bulimia, because of this dichotomous thought

which renders bulimia the abject other or the ‘ugly sister’ of the socially “superior” illness that is anorexia (Burns, 2004; Bordo, 2012; Dana, Lawrence, 1988). My concern is not with interrogating anorexia and bulimia as ‘rival disorders’, but rather calling attention to the differences of this disorder and adding to a new understanding and representation of it.

### 1.2.2. The Foreign body

The notion of the abject is frequently explored in visual art and subsequent artworks fall into the category of ‘abject art’. Rita Arya<sup>9</sup> defines this as art that “...involves the body being undone and taken apart” which is usually conveyed through “flesh, in particular viscera, bodily fluids and wounds” (2014:85). An example of abject art is the installation *Corpse Étranger* (1994) by Palestinian artist Mona Hatoum. Hatoum displays the body as laid open, easily accessible, abject and vulnerable to contamination.

In this piece, Hatoum uses an endoscopic camera to record the internal and external features of her own body, directing viewers from the outside of her body, to deep within its crevices and orifices. Her own internal and corporeal body is exhibited inside a cylindrical booth (fig. 6), presented as a visual sequence (fig. 7) of “displayed images of body fragments” projected on a circular sheet of glass on the floor (Lajer-Burcharth, 1997:195). Creating an immersive and multi-sensory element, the installation is accompanied by a soundtrack of “heartbeat booms” and “gurgling noises” (Sawchuk, 2014: 154). In *Real bodies: Video in the 1990s*, Ewa Lajer-Burcharth describes the installation as:

Fragments of flesh and organs at times hard to recognize, you have either never seen them so close-up or have not seen them at all (and perhaps would rather not be seeing them) flickered continuously under your eyes: among them a glistening surface of an eyeball; a magnified ear cavity yawning at you; a mouth opening wide into an unappetizing close-up view of the larynx; a corrugated inside of a stomach; a vein-streaked tunnel of the intestines; a mucous fold of the vagina; and a knotted recess of the anus. (1997:195)

These “fragments of flesh” do not add up to the image of a full body as we recognise it. ‘*Corpse Étranger*’ directly translates into ‘strange body’ or ‘foreign body’ and exhibits just that: a body that is strange and foreign to the viewer as well as the artist (Ross, 1997:150). Hatoum

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<sup>9</sup> In *Abjection and Representation: An Exploration of Abjection in the Visual Arts, Film and Literature*, Arya the fundamental concepts of the abject, and documents ways in which various artists have adopted this concept.

submerges herself within her own body in order to “render the body a territory of cultural self-redefinition” (Gutiérrez-Albilla, 2008:72).

One is not able to physically look ‘inside’ oneself without the use of sophisticated technology. The endoscopic camera films the most private and unfamiliar parts of the body and, in doing so, highlights moments where one would become aware of their internal features and “corporeal reality” like becoming ill and visiting a doctor (Ross, 1997:152).

Immersing themselves within the artist's body, spectators are reminded of their own corporeal existence and vulnerability, prompting feelings of disgust, anxiety, and abjection. Dan Cameron explains that the installation magnifies “scenarios in which our perceptual integrity—our sense of place in the world—is subtly called into question” (1997:26). Hatoum leads spectators through the internal orifices and passages of her own ‘foreign body’. According to Arya, she has turned the “secret compartment of her body into a piece of theatre and is sardonically reflecting centuries of the objectification of the female body” (2014:13).



Fig 6: Mona Hatoum, *Corps Étranger* (1994), video installation, 350 × 300 × 300 cm, photography by Fred Scruton.



Fig 7: Mona Hatoum, *Corps Étranger* (1994), video installation (detail), dimensions variable, photography by Fred Scruton.

My own work similarly calls participants to recognise their corporeal functioning. As one walks through *In My Flesh* they take on the perspective of an endoscopic camera, such as the one that Hatoum swallows, mapping the confined surface and orifices of my own reconstruction of the internal bulimic body. Participants first enter by stepping through the large, constructed mouth (fig. 8) where they are met with sloppy eating sounds. One is then directed up two flights of stairs which have been transformed into a tunnel like oesophagus (fig. 9). Peculiarly, muffled heartbeat sounds are echoed throughout this section of the installation. At the top of the oesophagus, one reaches a cavity (fig. 10) indented into the wall of the space, like a cave made from flesh. Hanging from the flesh are drops of hot glue which mimic moisture or liquid (fig. 11), which is emphasised by echoed sounds of liquid dripping.

Following this cavity, one reaches the final and largest section of the installation: the stomach. The room/stomach is covered in the same flesh-like material as the rest of the exhibition. Hanging from above are illuminated, alien-like 'globs' of flesh (fig. 12). Within the stomach, reddish-brown large intestines (fig. 13) lie sprawled in a knotted mess on the floor as if the body has been opened and its insides have fallen out. Accompanying this room are unsettling

sounds of a stomach rumbling and gurgling. While in this room/stomach, one can lounge, lay, stand and step over the intestines in order to fully experience the space.

Hatoum's installation *Corpse Étranger* (1994) and my own work hold similarities in the use of immersive and sensory strategies to encourage participants to recognise their own corporeality and aject bodily functions. My installation also emanates a similar unease and abjection. Rather than using fragmented and obscured images of my body as Hatoum does, *In My Flesh* presents a body that is seemingly whole yet disorderly. Although the enlarged parts such as the mouth, flesh and intestines, and accompanying sounds occupying my installation are recognisable as pertaining to the body, the movement and placement of the bodily parts are not ordered with exact anatomic reference to the human body, but rather with emphasis on those parts physically affected by the illness.

The movement of bodies walking and engaging through the space mimics the movements and corporeal nature of bulimia: bodily matter moving in and out of the space. As people enter and exit the constructed body, they become an integral part in the process and understanding of bulimia. This creates a sense of chaos and uncertainty, reinforcing feelings of abjection and lack of control in association with the installation.



Fig 8: Ashley Hodgson, *Mouth/Entry* (2020), sculptural installation (view of participant walking through), dimensions variable, photography by Sarah Bell Isted.



Fig 9: Ashley Hodgson, *Oesophagus/Stairs 1* (2020), sculptural installation (view of participant walking through), dimensions variable, photography by Sarah Bell Isted.



Fig. 10: Ashley Hodgson, *Drip/Platform* (2020), sculptural installation, dimensions variable, photography by Sarah Bell Isted.



Fig 11.1: Ashley Hodgson, *Drip/Platform* (2020), sculptural installation (detail), dimensions variable, photography by Ashley Hodgson.

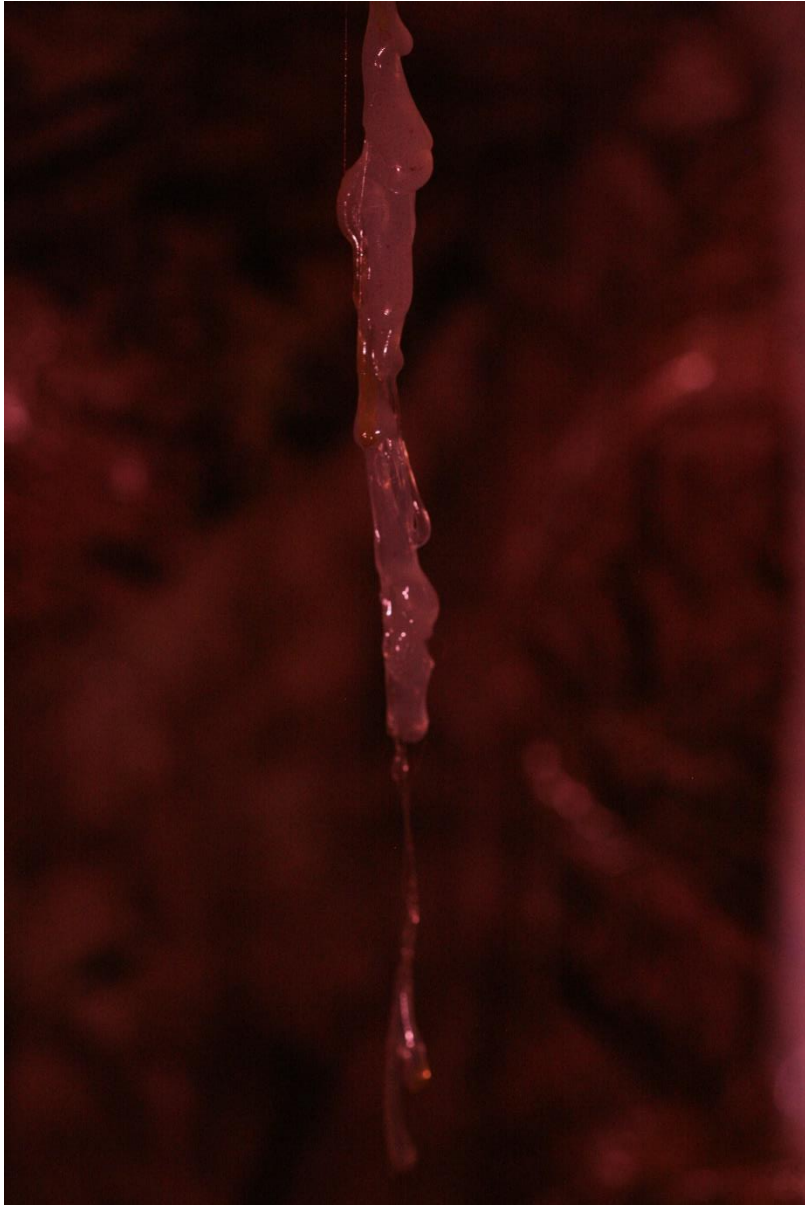


Fig 11.2: Ashley Hodgson, *Drip/Platform* (2020), sculptural installation (detail), dimensions variable, photography by Ashley Hodgson

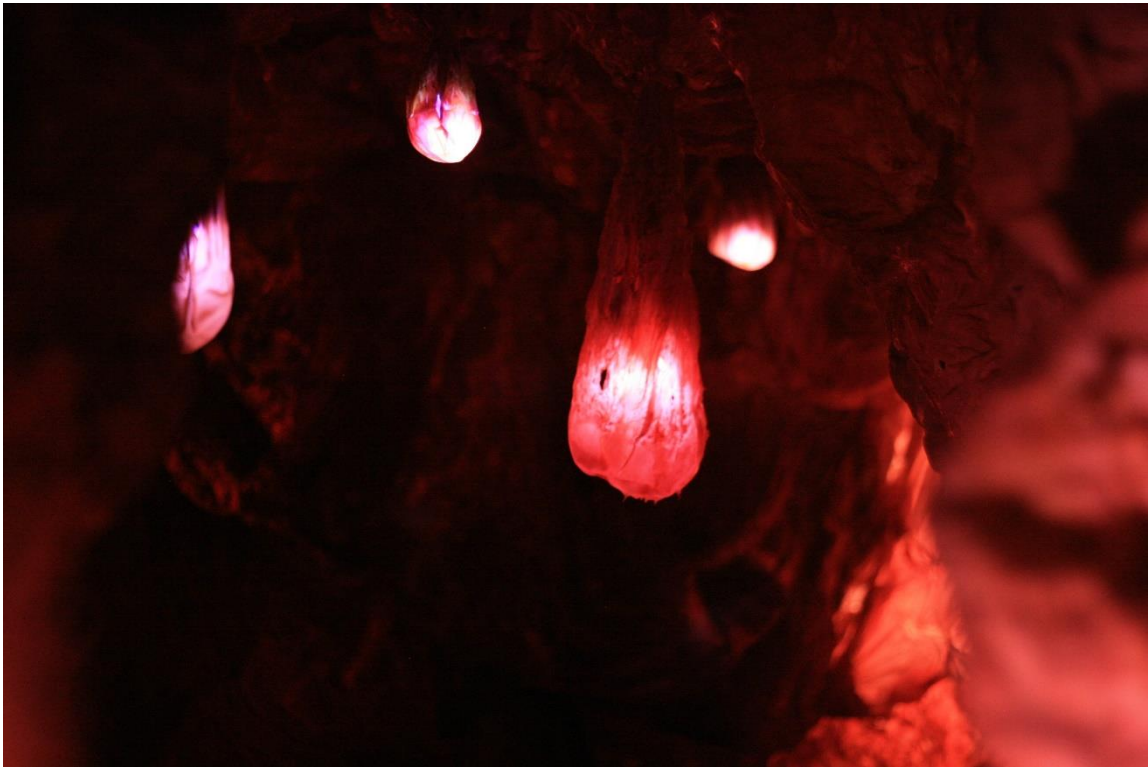


Fig 12.1: Ashley Hodgson, *Stomach/Room* (2020), sculptural installation (detail), dimensions variable, photography by Ashley Hodgson.

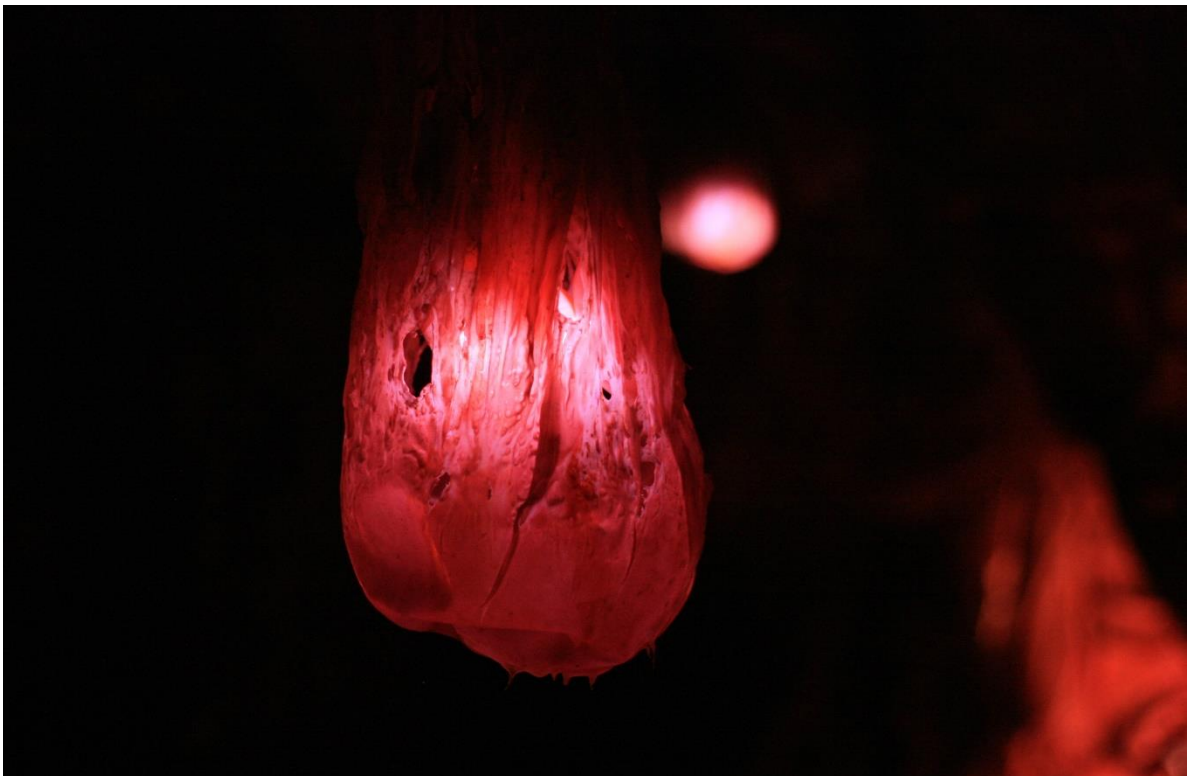


Fig 12.2: Ashley Hodgson, *Stomach/Room* (2020), sculptural installation (detail), dimensions variable, photography by Ashley Hodgson.



Fig 12.3: Ashley Hodgson, *Stomach/Room* (2020), sculptural installation (detail), dimensions variable, photography by Ashley Hodgson.

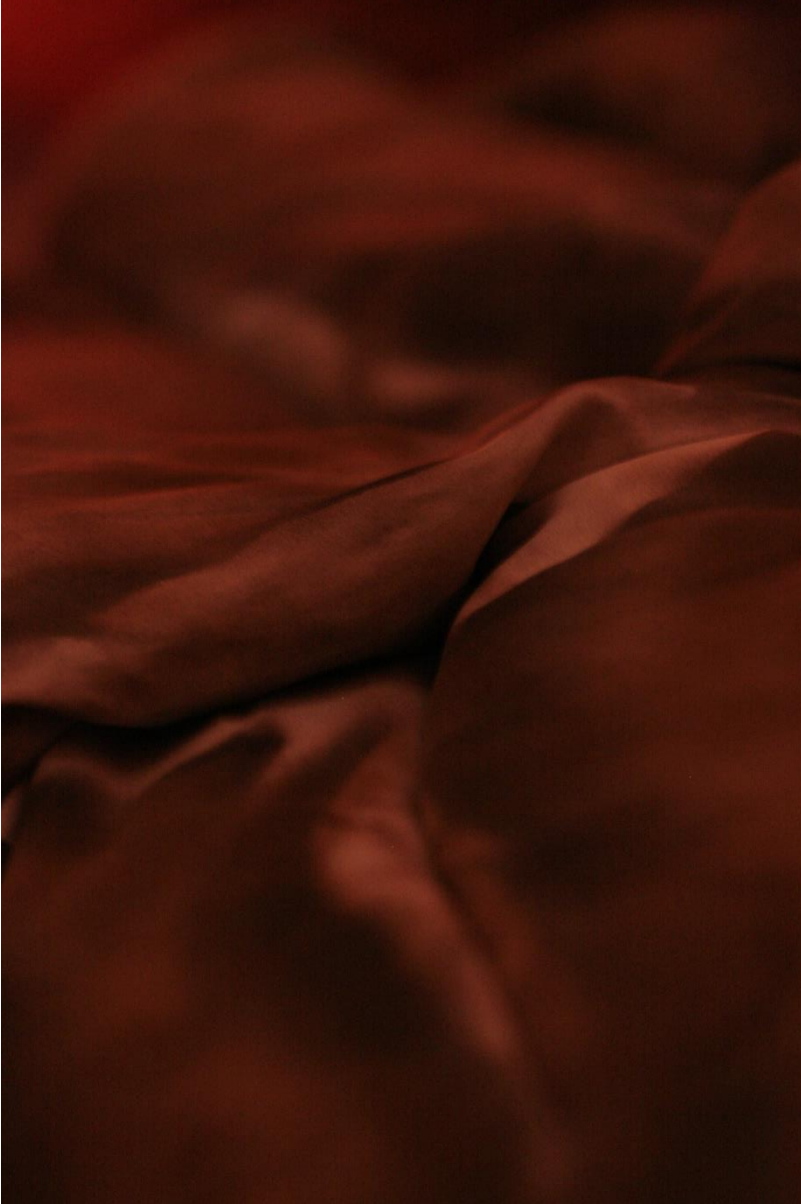


Fig 13: Ashley Hodgson, *Intestines/Floor* (2020), sculptural installation (detail), dimensions variable, photography by Ashley Hodgson.

## Chapter 2: Architecture of the Bulimic Body

### 2.1. A hidden affair

#### 2.1.1. A bulimic space

Architectural spaces bear silent witness to many moments and memories in life. These structures give material<sup>10</sup> and concrete form to the conditions of everyday life and societal institutions and provide spaces in which to cultivate memories and experiences. Recollecting and remembering past experiences is bound with one's understanding of place and as Pallasmaa confirms, one remembers a place "because it has affected our bodies and generated enough associations to hold it in our personal worlds" (2012:45). Martin Zherlang confirms that memories and experiences are deeply connected to places and structures:

when the place has been constructed in the mind, it can be used as a fixed point for memory. Using its walls for support, finding one's bearings from its columns, gathering one's thoughts in its nooks and crannies. Place and spirit reside together. (2004:12)

Recalling memories of my personal experience of bulimia, I am reminded how deeply private and hidden the affair was and how my acts of bingeing, purging and abuse of laxatives only happened inside secure, private, and secluded places. I spent most of my formative years at Rhodes University submerged within the Fine Art Painting and Sculpture building<sup>11</sup>, its rooms hold seven, significant years of my life. Its walls have borne silent witness to my bouts of bingeing and purging and protected me from judgement and shame. As a space where I remember many of my experiences in my battle with bulimia, it seemed suitable to use the hidden architectural space of the fire escape at the back of the building for my installation.

Situated on mid-campus, the red face brick and concrete, three story building (fig. 14) seems relatively normal on the outside: surrounded by maintained green lawns, trees, shrubbery, occasional passers-by, and frequent students smoking. On the inside, however, chaos ensues. As a building used for painting and sculpture, it is filled with canvases, paints, scraps, relics, remnants, and traces from years of practicing art students and lecturers. The internal structure itself is labyrinthine, with many winding and tiresome staircases, a multitude of rooms and windows, large open floor spaces, and juxtaposed wooden and industrial metal elements. In

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<sup>10</sup> 'Material' is used in this sense as referring to something physical and tactile.

<sup>11</sup> Located on upper Prince Alfred street, The Fine Art Painting and Sculpture building is the designated building for practicing painting and sculpture students. The building is mostly used by third, fourth and postgraduate students.

this sense, the architectural nature of the building echoes the very hidden nature of bulimia: barely any outer symptoms of distress, but an inside full of evidence and contamination.

On the left and right-hand sides of the Fine Art Painting and Sculpture building, are fire escapes with narrow, winding staircases that lead to a few small hidden rooms along with electrical switch boards and exit doors. Many students are unaware of these concealed rooms. Drawing on this hidden ‘secret’ architectural element, I make use of the left flank of winding staircases, and one of the small rooms in which to install my installation.

The ground floor on the left flank of the building, has two heavy wooden and glass doors (fig. 15) which introduce a small concrete foyer and 5 flights of stairs (fig. 16) winding to the very top floor of the building. There are narrow and tall windows, and four small rooms used for storage scattered along the way. For the purpose of my exhibition, I make use of the three flights of stairs at the bottom of the building, the platforms connecting each flight of stairs, as well as one of the rooms situated on the first floor. In the next section I will discuss how I have made use of this specified area to construct my installation.



Fig 14: Photograph of Fine Art Painting and Sculpture building, Rhodes University, photography by Ashley Hodgson.



Fig 15.1: Detail of entrance before sculptural installation, Fine Art Painting and Sculpture building, Rhodes University.



Fig 15.2: Detail of entrance before sculptural installation (close up), Fine Art Painting and Sculpture building, Rhodes University, photography by Ashley Hodgson.

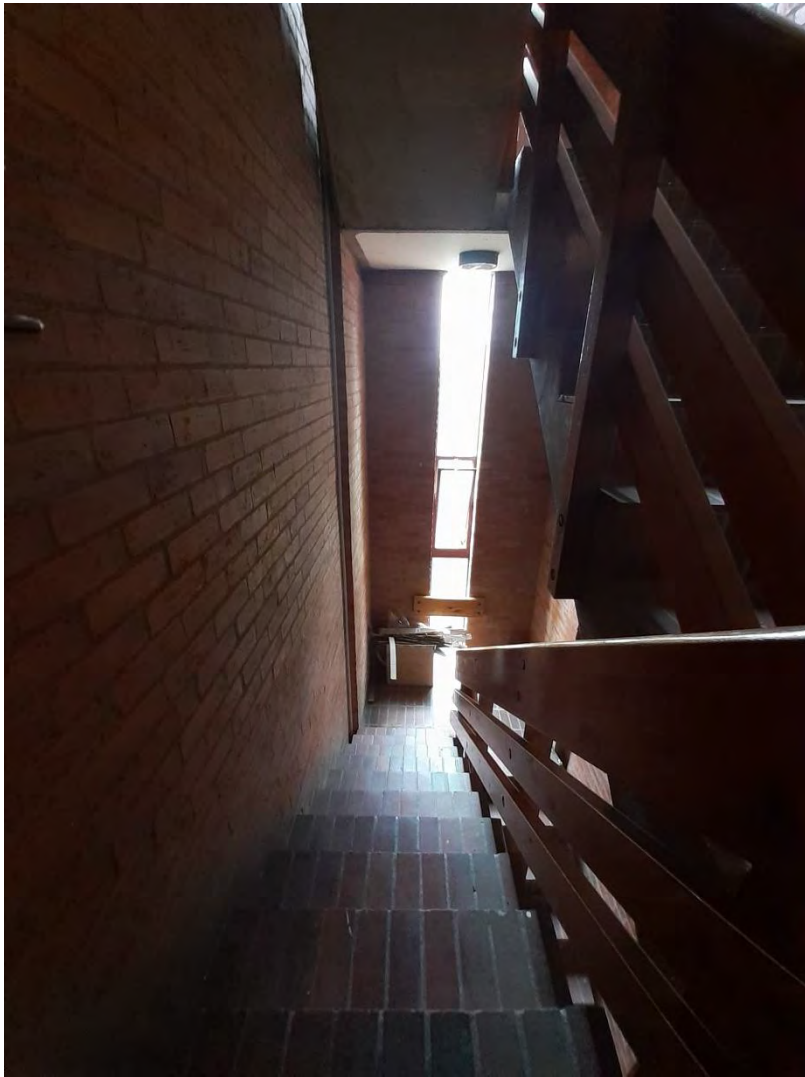


Fig. 16: Detail of stairs before sculptural installation, Fine Art Painting and Sculpture building, Rhodes University. Photography by Ashley Hodgson.

### 2.1.2. Architectural Anatomy

In the chapter *Bodily Identification*, Pallasmaa elaborates on the connection between bodies and architectonic structures and explains that human beings are in “constant dialogue and interaction with the environment” to the extent that one cannot distinguish “the image of the self from its spatial and situational existence” (2012:69). Material objects can be seen as figurative extensions of the body, and as a physical structure, a room/building can act as a metaphor for the body (Vidler, 1990:4).

Human proportions generally determine the relative size, length and width of certain structures, and there are anatomical features that can be seen in a building/room. The bricks and plaster can be imagined as the flesh and bone of the structure, and a coat of paint can be compared to skin. The walls itself also share similar properties with skin as it mediates between the external world and the inside that it encases. Buildings or rooms, like bodies, are permeable structures that contain orifices through which things enter and exit. A door frame as a transition space between the inside and the outside can be likened to lips, and a doorway may be assimilated as a ‘mouth’ where things enter the body/building (Blier, 1983:374). The windows act as “the eyes of the wall”, air vents as the more discrete orifices or pores, and other architectural features such as piping, plumbing or electronic cables reference the urinary tract, digestive system and the internal veins and capillaries of the body (Baasch, 2013:27). More specifically in my installation space, the staircases can be linked to the oesophagus, spine or ribs of the body. Buildings may also fall ill, degrade and deteriorate in the same way that bodies do.

Comparing the architecture of the building to the anatomy of the body, the sculpted bodily elements of my installation are situated and named according to certain anatomical features of the space. The entrance to the exhibition, titled *Entry/Mouth*, is marked by a large constructed mouth which can be seen as an entry point to the body, and the ‘primary’ point of ingress and egress in bulimia. The constructed oesophagus is made up of wire and fabric that has been manipulated into concentric circles (fig. 17) that form an arch above the two flights of stairs. I have titled these *Stairs/Oesophagus 1* and *Stairs/Oesophagus 2*. The position of each step mirrors the placement of each ring of the oesophagus (*Oesophagus/Stairs 1* contains nine concentric rings which mirror the nine steps, and *Oesophagus/Stairs 2* contains six concentric rings which mirror the six steps). The walls and railing on either side of the stairs are used to support and prop the esophageal rings in an arch. The walls of the space have been treated like bone and I have used the fabric like flesh, to conceal them. The stairways are already quite

narrow and I have padded the walls with more flesh-like fabric to further create a feeling of discomfort. The flesh-like cave at the top of the stairs is built into the already indented wall space, with the fabric draping from (and clinging to) the structure of the walls and balustrade.

Inside the *Room/Stomach*, the fabric is also draped and attached to the ceiling, windows, and walls of the room, and the containing intestines make use of the floor space for shape. Covering the floor and steps of other parts of the installation is a red, tongue-like carpet (fig. 18) that runs throughout. The height of the installation, however, does not coincide with the ceiling height of the space. Instead, the fabric is attached to wire hanging from sections of the ceiling in order to create varying heights throughout. The lowest height measures to the height of my own body, further highlighting the link between body, building, and experience.



Fig 17.1: Ashley Hodgson, *Oesophagus/Stairs 1* (2020), sculptural installation (detail), fabric, dye, wire, dimensions variable, photography by Sarah Bell Isted.



Fig 17.2: Ashley Hodgson, *Oesophagus/Stairs 2* (2020), sculptural installation (detail), fabric, dye, wire, dimensions variable, photography by Sarah Bell Isted.

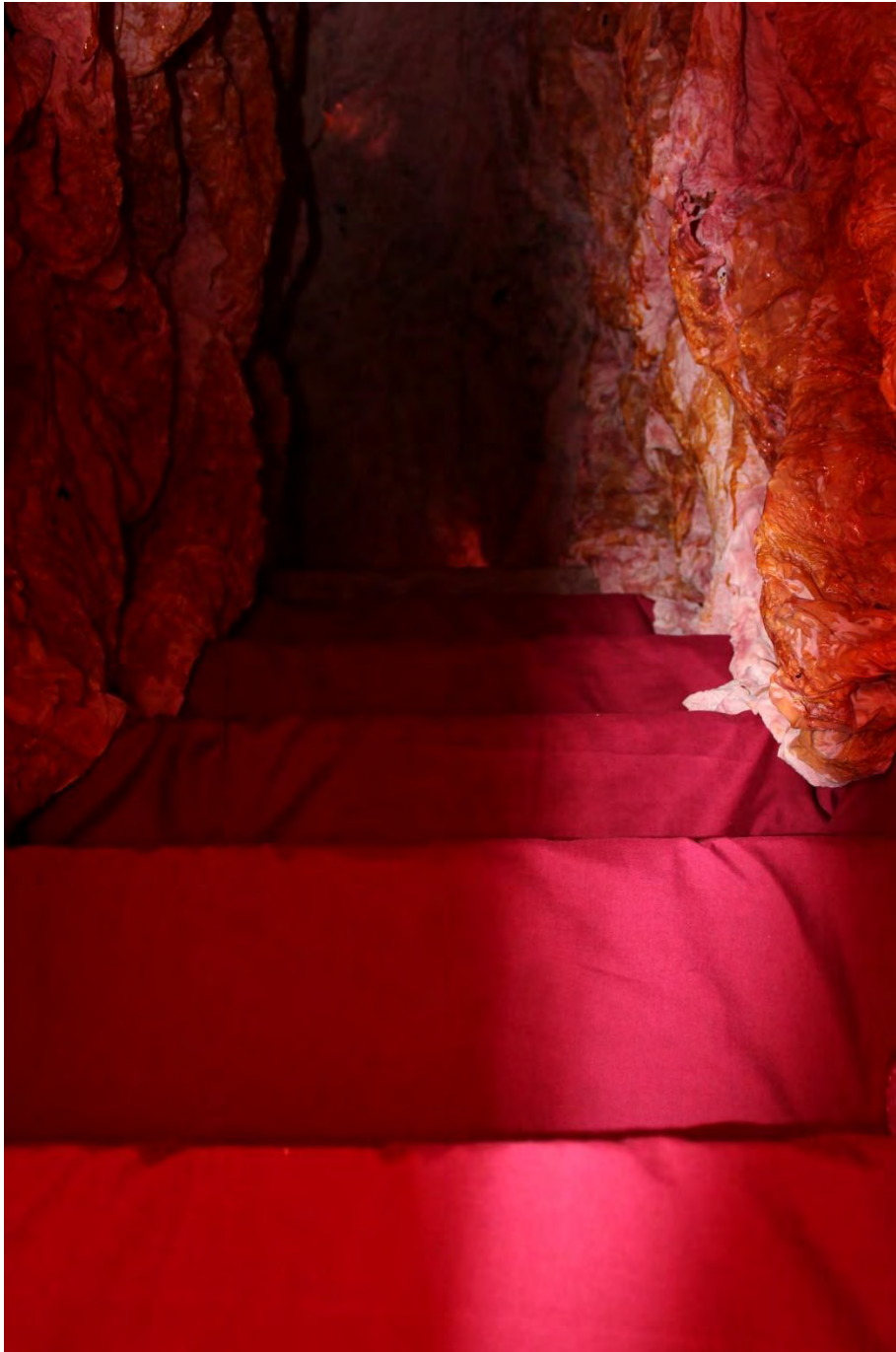


Fig. 18: Ashley Hodgson, *Tongue/Floor* (2020), sculptural installation, fabric, dimensions variable, photography by Sarah Bell Isted.

## 2.2. Spaces and their traces

### 2.2.1. Moving through space

In his theorisations on the production of space, Henri Lefebvre notes that space is “qualified” (1974: 174) by the body. Space, according to Lefebvre, centers around the body and its movements, the movement of the body creates a theoretical space. Lefebvre further notes that living beings move and create space with what is available to them: “Marks are made by living beings with the means readily available to them, notably excreta such as urine, saliva, and so on” (ibid).

He uses the example of the spider that extrudes its web, creating marks and traces through the movement of its body, and in doing so visibly demarcates its space. The emphasis here is on the traces that are left behind through the movement in, and interaction with, one's surrounding space. Like the spider, bodies inhabit and move through architectural spaces, leaving behind visible and invisible marks and traces. These traces become embedded in walls, floors and ceilings and are evident through every hair, scuff mark, speck of dirt, or flake of dead skin that seep into cracks and become ingrained on its surfaces.

As an act powered by the movement of matter in and out of the body, it can be argued that the act of binging and purging not only leaves visible and invisible traces on the bulimic body, but also on the space in which these acts take place. The architectural space becomes inscribed by these acts of purging which expel the body's inner contents to the digestive/piping system of the building in which it takes place. In so doing, the once distinct boundaries that separated the body from its space, become even more enmeshed than the usual human detritus that accumulate in spaces through the disordered and abject nature of the purging acts. As a building that I have performed bulimic practices in and moved around in frequently, the Fine Art Sculpture and Painting building holds traces of my body ingrained in the walls, floors, and digestive/piping system, further embodying my experience.

My installation makes use of various strategies to highlight the link between body, bulimia, and space. The exhibition is constructed as if leading participants on a journey through a body, and the very movement of participants entering, moving through, and exiting the space mimics the movement of food in the experience of bulimia. One is ‘swallowed’ upon entering the mouth, ‘digested’ while journeying through the body, and is then ‘purged’ when exiting back

out of the mouth. The installation itself is narrow and confined and one is likely to make contact with the flesh of the body. Through this contact and movement through the space, participants leave behind marks and traces of their own experiences and existence.

### 2.2.2. Häutungen - “skinning’s”

Swiss artist Heidi Bucher (1926–1993) explored the boundaries between bodies and everyday objects through her latex imprints and casts of room interiors, objects, clothing and the human body which she refers to as *Häutungen* (“skinning’s”) (Munder, 2015:55). Bucher’s works went unnoticed until after her death in 1993 but were rediscovered in 2004 when a selection of her pieces were given a solo exhibition at the Migros Museum für Gegenwartskunst (Migros Museum for Contemporary Art) in Zurich. Her works were again curated into an exhibition held at the Parasol Unit Foundation for Contemporary Art in 2018 which included a significant number of her latex works as well as screenings of films that document her at work. For the purpose of this thesis, I am particularly interested in Bucher’s skin-like imprints of architectural surfaces or *Raumhäute* (“room skins”) which she made during the last two decades of her life, as they hold similarities to my own art practice.

The imprints were taken by pressing thin cloth/gauze drenched in liquid latex and iridescent mother-of-pearl pigment against an architectural surface and then peeling it off just before it hardens. The result is a “skin” that takes on a transparent yellow colour as it dries, and over time gradually degrades, becoming brittle in a similar fashion to human skin (Lee, 2019 :9).

Acting as “traces of traces” these room skins seem to create spaces “formatted by the inhabitants” as they bear the lived marks of the space and the “absent presence of bodies” (Lee, 2019:9). They serve as physical documentation of the immaterial memories and activities that took place in the rooms she cast (Sloterdijk, 2005:232). These memories and past events are evident through each scuff mark, dirt, flakes of paint, dust, the imprint of splinters, cracks, or nails that are embedded in her latex skinning’s (Cumming 2018). Bucher’s first “room skin”, *Borg* (fig. 19) created in 1976, is a haunting and visceral replica of the cold-store structure of a former butcher’s shop in Switzerland, which she used as her studio.

The process of skinning and creating haunting replicas of these architectural surfaces allowed Bucher to excavate memories from within herself. While “skinning’s” such as *Borg* commemorate her past as the spaces she grew up in, they simultaneously exist as a liberation from the memory these things hold for her. Because of its visceral and skin like qualities it is

almost as if the room of the architectural structure has shed its skin and left behind an empty shell along with all the memories that were embedded in its walls. This is also reflected in the mantra she often repeated, *Räume sind Hüllen, sind Häute* which translates into “Spaces are shells, are skins” (Parasol Unit. 2018). Bucher’s skinning’s creates an alternate space in which to continue remembering the past but also strips the architectural structure naked and gives it a new form able to keep new memories and a new existence separated from its past.

In works such as *Das Kleine Glasportal* (1988) or “Small Glass Portal” (fig. 20). Bucher’s fascination and preoccupation with both metaphysical and physical space is particularly evident. *Das Kleine Glasportal* is a replica of the entrance of the former psychiatric institution Bellevue in Kreuzlingen, Switzerland, which showed her shift in focus to institutional spaces. Using the mental institute as a subject of her ‘skinning’s’, Bucher refers to both physical and mental spaces. Bucher was fascinated with spaces, whether physical or metaphysical but particularly when they existed in a state of flux and permeability. Similarly, Bucher’s skinning’s exist in contradictory forms of “sturdy yet fragile, transitory yet perpetual, solid yet flexible” and depict the interchangeability of the body, skin, memory and architecture (Ardalan, 2018: 13). According to Lee (2019:9), in work such as *Das Kleine Glasportal*, the laborious and physically demanding act of peeling the latex from the architectural surface, reflects Bucher’s need to physically detach herself from the institutional and patriarchal values she was exposed to during her upbringing. In images of Bucher removing the ‘skins’, she seems momentarily engulfed and merged with the work (fig. 21).

The method that the artist used to cast architectural ‘skins’ echoes her approach to the body and clothing, suggesting that these concepts of architecture, material objects and the body are intertwined. My own artistic process similarly explores the complex relationship between the body and the objects it encounters: architecture and clothing. The material I make use of in my own practice bears similar visceral, skin-like and corporeal qualities as Bucher’s latex skinning’s.

While Bucher seems to ‘undress’ the architectural spaces that she casts in an attempt to extract, separate and come to terms with her past and institutional spheres, my own practice clothes and dresses the room with my own experiences and the patriarchal and institutional standards that are inscribed on bodies and result in eating disorders such as mine. This method of covering and coating the space references the practice of bulimia as one that includes the ritual of covering one's body with clothing and hiding bulimic acts behind closed doors.

My own work also differs in its attempt to engulf and merge spectators into the bulimic body through the inclusion of auditory recordings of bodily sounds.



Fig 19: Heidi Bucher, *Borg* (1976), sculpture, textile, latex, mother of pearl, pigments, bamboo, 98.4 x 137 x 39.3 inches, photography by Lehmann Maupin.



Fig 20: Heidi Bucher, *Das kleine Glasportal* (1988), sculpture (view of Bellevue Psychiatrische Anstalt Kreuzlingen), textile and latex, dimensions variable.



Fig. 21: Heidi Bucher, 1976, Bucher in her studio, Zurich, dimensions variable. Image courtesy of AWARE.

## Chapter 3: Fabricating the Bulimic Body

Many, if not most architectural spaces are decorated and draped in things like curtains, rugs and furnishings. In this final chapter, I continue looking at material extensions of the body by turning my attention to textiles. Fabric/cloth, which forms the main medium that is used to construct my installation, is a particularly significant material in terms of my experience with bulimia: I used its threads to wrap up and conceal parts of my body with which I was dissatisfied.

Like walls and architectural surfaces, textiles share the mutual ability to “cover” and “demarcate” the inside from the outside (Hartoonian, 2006:272). Clothing forms a shell that encases and enclose the body, creating a boundary or threshold, and because we are constantly surrounding and in contact with it, cloth could arguably form the very threads that not only hide or conceal, but also connect the body to the outside world (Attfield, 2000:122).

### 3.1. A membrane of imagination

#### 3.1.1. The second skin

As one lives in these “shells” it could also be considered as an “archetypal everyday material” (Lee, 2019:4) that wears us just as we wear it. When a child is born, they are wrapped and swaddled in cloth, and growing up one is in frequent contact with cloth in the form of clothing and furniture. In this sense cloth, fabric, and textiles are essentially the most intimate and broadly relatable object that touches the body (Lee, 2019:3).

Clothing is often referred to as a ‘second skin’ or an ‘active skin’ as it holds many similarities to actual skin: it is porous, soft, and sometimes even odorous (Entwistle, 2002:133). Like skin, cloth/fabric also encases the body and forms a barrier defining the inside of the body from the outside environment (Lee, 2019:4). In the discussion of the use of cloth in artworks, Patricia C. Henderson classifies cloth as a “membrane of the imagination” (2018:175). Drawing on the skin-like qualities of fabric and textiles, I use it to imagine and materialize the ‘fleshy’ interior of a bulimic body.

I make use of, and manipulate a synthetic fabric called ‘pongee lining’ using a heat gun. Pongee lining is a thin and light weight, woven fabric that comes in a variety of colours. This fabric is an easily malleable material, and pongee lining is cost-effective given the scale of the

installation. The technique of manipulating and melting the fabric<sup>12</sup> using heat can only be applied to synthetic materials such as those made from polyester as the heat melts the plastic components of the fabric changing its shape, texture, and colour. While I have practiced with many different types and colours of synthetic fabrics, pongee lining creates a convincing ‘flesh like texture’ (fig. 22) as it can be molded to create soft ‘fleshy’ parts or more detailed ‘sinew’ like textures.

My process includes melting large squares of fabric and then dyeing them in baths of various coloured dyes and pigments. These fabric pieces are then pieced together in the installation space, and if necessary, resprayed with more dye using a spray bottle. The final stage in creating the flesh-like fabrics involves priming, and then varnishing the installed fabric with a clear, high gloss paint (fig. 23). The varnish amplifies and livens the colours of the dye and makes the fabric appear wet and slimy, giving it a realistic wet, flesh look.



Fig. 22.1: Ashley Hodgson, *Flesh/Wall* (2020), sculpture (detailed), fabric, dye, paint, dimensions variable, photography by Ashley Hodgson.

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<sup>12</sup> This technique takes threads from Japanese artisans who traditionally used “resist methods with heat-setting processes” (Haar, 2011: 31). This method, referred to as “shibori”, is a way of “shaping fabric and securing it before dyeing” (Haar, 2011: 31).

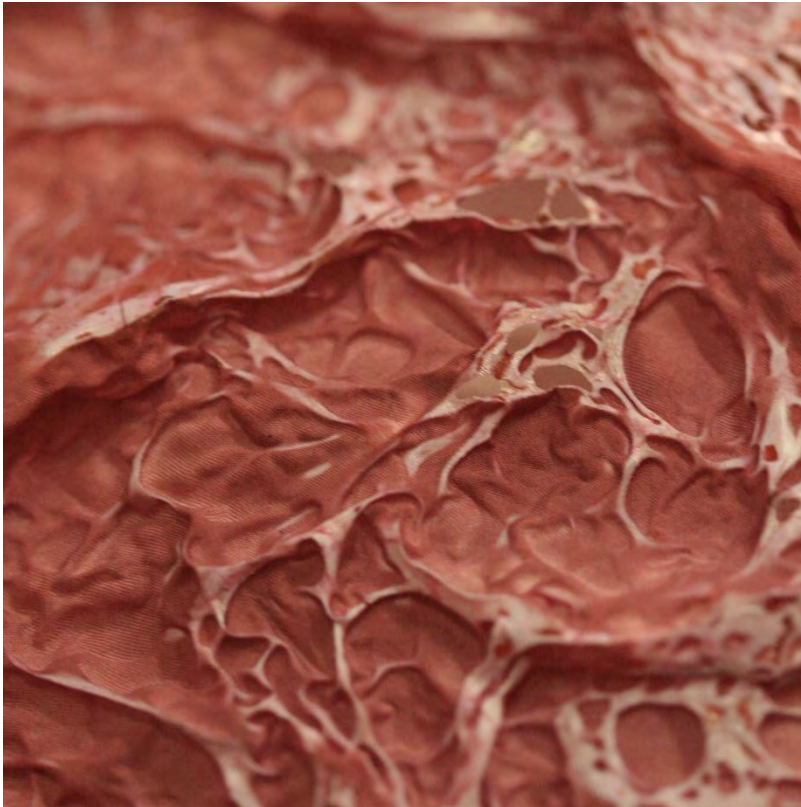


Fig. 22.2: Ashley Hodgson, *Flesh/Wall* (2020), sculpture (detailed), fabric, dye, paint, dimensions variable, photography by Ashley Hodgson.



Fig. 23.1: Ashley Hodgson, *Flesh/Wall* (2020), sculpture (detailed), fabric, dye, paint, varnish, dimensions variable, photography by Ashley Hodgson.



Fig. 23. 2: Ashley Hodgson, *Flesh/Wall* (2020), sculpture (detailed), fabric, dye, paint, varnish, dimensions variable, photography by Ashley Hodgson.

### 3.1.2. A prosthesis

In his explanation of ‘art-in-the-flesh’, Garoian’s reference to ‘flesh’ not only refers to the fleshiness of the body, but also the web of materiality that surrounds and connects the material world to the body, suggesting that “exteriority and interiority of the body are inseparable”(2013: 124). In *Parables for the Virtual: Movement, Affect, Sensation* Brian Massumi describes this ‘web of materiality’ and material extensions of the body as a “prosthesis” (2002:95) of the body, noting the body as the original prosthesis. He states:

The thing, the object, can be considered a prosthesis of the body-provided that it is remembered that the body is equally a prosthesis of the thing. (ibid)

If the body can be argued as the ‘original prosthesis’ that we learn to manipulate (through things like shaving, scars, tattoos, and even bulimia), then other prostheses of the body (like textiles or architecture for example) become a “continuation of a process that began before we were born” (Hayles, 1999:3). In this sense the very construction and conceptualisation of my installation is not only a representation of my experience but becomes an extension and prosthesis of my body. Garoian expands on this by suggesting that through art-making, the body engages and connects with “the corporeality of materials, tools, and objects” and in doing so “sensations, associations, and understandings extend one to another prosthetically” (2013:124). The very process of making art and engaging with materials and mediums, highlights the powerful connection between the body and ‘the world perceived as flesh’, he suggests:

...the existential liveness of art, its ability to arouse and agitate the senses, to evoke and provoke thought, occurs simultaneously in the flesh of the body and in the world perceived as flesh in the body. (2013:123)

My artistic process includes the method of melting and burning the fabric to create a flesh-like texture. The very method of perforating, melting, and manipulating the fabric mimics a similar burning and perforating effect that bulimia has on the internal body, and so becomes a “continuation” (Hayles, 1999:3) of the practice of bulimia. Another example of this continuation includes the use of brightly coloured dyes, particularly those made from food, which resonates with a method of using bright coloured foods as “markers”. Before a binge, bulimic patients tend to eat foods that are bright coloured, like beetroot. When purging, the bright pink vomit marks the point at which the stomach is empty and has expelled all of its

contents. Replicating these colours into the flesh, marks the installed body as one expelled, and already extricated.

After practicing with many different colours of pongee lining, I selected to use white pongee lining so that I was able dye it in the appropriate shades of pinks, yellows, blues, and purples that can be seen in flesh. I initially opted to use solely food sources such as beetroot, red cabbage, turmeric, food colouring and juice cordial as dyes. As time passed, I started exploring multiple ways of dyeing fabric and incorporated a concoction of pigments such as store-bought fabric dyes; fabric paints; powder paints; paint pigments; inks; and cement oxides. I see this use of multiple sources of dyes and pigments as similar to the consumption of food during a binge. While I was bulimic, my binge episodes would include the consumption of various foods in large, messy quantities.

### 3.2. A Material Matriarchy

#### 3.2.1. Matrilineage

I was first introduced to the world of needlework and textiles by my mother and grandmother who taught me the basics of stitching and sewing. Various other methods such as embroidery and crochet have also been practiced by my foremothers- the evidence lies neatly folded in my grandmother's kist. My mother and grand-mother always sewed and made my clothing as a child and I have come to consider this shared practice between us as a 'material matriarchy': a community of women who are interwoven through a shared interest and practice of various needlework and textile mediums. Debbie Stoller expresses a similar sentiment in *Stitch 'n Bitch: The Knitters Handbook* where she states:

Whenever I would take up the needles I would feel myself connected not only to my own mother, grandmother and great-grandmother, but also to the women who had developed the craft, the women who had known, as I did, the rhythmic click-click-click of one's knitting needles. (2003:9)

I see these mediums as traces of the women in my family: their patterns, textures, and even stains and tears give clues to the cultural, spiritual, and personal aspects of their lives. Material objects such as fabric/cloth can be considered as artifacts, where their "physical or representational form - their size, shape, colour, design, weight, and volume" symbolize past or present cultures and identities, and the intermingling of social and material life (Grassby,

2005:593). The threads of my mother's clothing tell the story of her long struggle with bulimia and anorexia.

When I was conceived, my mother was in the midst of her own eating disorder. Her body was thin and could not grow and create enough space for me to develop properly. As a result, I was born with "clubfoot" which left my feet turned completely inwards. Before the age of one, I had corrective surgery on my feet which enabled them to eventually grow 'normally'. In this sense it could be noted that my experiences of bulimia were already inscribed on my body from the moment I was born. Yeseung Lee (2019:7) explains that our very first sensory interactions with our caretakers leave imprinted "marks" on the body which we carry throughout our lives and is the very first point of reference we use to formulate our own identity. Lee confirms that "from the moment a newborn baby is first held by its mothering person, his/her handling, swaddling, and bathing touch leave 'marks' on the baby's body-psyche" (2019:7).

Cloth sharing its likeness to skin could also arguably have these sensory traces embedded between its threads. Lee further notes that these "indexical traces" that exist on the body and material blurs the boundaries between "space-textile-garment-skin"(2019:6) and in doing so forms a link between the real and materiality.

I have two very visible scars that were stitched and inscribed into the skin of my feet during the operation, and for me they serve as a reminder and symbol of the shared experience both my mother and I have. I translate similar 'marks' of my experience into the fabric of my installation - the traces are evident in my working with the synthetic material as by burning and melting the material I create perforations and marks, as well as literally marking and transforming the colour using dye.

In *Being-in-the-Market versus Being-in-the-Plaza: Material Culture and the Construction of Social Reality in Spanish America*, Miles Richardson explains that bodily experiences and perception become "material" (1984) or physical by transforming it to symbols and then turning those symbols into objects like artifacts. Richardson (1984: x) suggests that we use objects to evoke experience, thus molding experience into symbols and then melting symbols back into experience.

My installation is able to convey and evoke my experience with bulimia by physically "molding" and melting fabric into material symbols of my experience. The action of cutting open, and then sewing closed the skin on my feet is mimicked through the cutting and stitching together of different bodily shapes of flesh, the intestines, the oesophagus, and the mouth. By

experimenting with the needle practices and the materials that have been passed down by the women in my family, my practice makes use of the metaphorical threads that connect our shared experiences.

### 3.2.2. Social fabric

My installation makes use of a material that not only has my own and my family's experiences embedded in its threads, but also the culture of bodily ideals and gendered practices. While men have historically “plied the needle”, Maureen Daily Goggin (2009:2) states that needle practices became gendered and labelled as “women’s work” under modernity. Needlework such as sewing, stitching, crochet and knitting became an “epithet for the boring, mundane, domestic tasks beneath the dignity of a man” (Weisner, 1986:205). Goggin further acknowledges that the relationship between women and their needle are far more complex as the needle has not only been used to separate and define gendered groups, but also hierarchical social and economic systems:

For women of all stations in life and in all socioeconomic classes, needlework has been both a domestic and domesticating labor, both a tool of oppression and an instrument of liberation, both a professional endeavor and a leisure pastime, both an avenue for crossing class boundaries and a barrier confirming class status. (2009: 3)

Depending on one's “station”, needlework could either be a necessary income or reserved for luxury and leisure time for those who could afford it (ibid). Eating disorders exist within a similar complex relationship: some scholars suggest that bulimia affects people of all classes (Dlagnikova and van Niekerk. 2015: 106), while others argue that it only exists within upper class groups who can afford the wasteful and costly habits of bringing large amounts of food only to purge and expel it afterwards (Boroughs, Krawczyk and Thompson, 2010: 725). While eating disorders affect both men and women, it has been, like needlework, classed and “inscribed” (Grosz, 1994) as a ‘feminine’ practice (Goggin, 2009:3). Squire points out that: “the lived bulimic body is not an individual construction, but is developed within certain habitats, habitats which are gendered, raced, and classed (2002: 24).

### 3.2.3. Anthropodino

Brazilian artist Ernesto Neto created a monolithic, 36 by 54-meter-long, “maternal space” (Johnson, 2009) titled *Anthropodino* (2009) (fig. 25). Occupying most of the Park Avenue

Armory Drill Hall in New York, the commissioned anthropomorphic structure leads spectators through body-like passageways and hulls made of stretchy and soft pantyhose fabric, plywood, and sacks filled with sand and aromatic spices (Wilkin, 2009:483). In an interview with Jess Willcox, the artist describes his working process:

I assume the position of anthropologist as a human being. I am interested in the animal that exists in us — the monster, the dinosaur, the imaginary. (2009)

Neto continues that the title *Anthropodino* draws from ‘anthropology’ and ‘anthropophagia’ (ibid). The term ‘anthropophagia’, meaning cannibalism, was often used in reference to the 1960s Brazilian art movement *Tropicália* which was established as a “*form of cultural critique*” (Martins, 2010: 409). Although rooted in the politics and cultures of Brazil, the movement appropriated and took inspiration from Europe as a method of not only devouring and “internalizing”(ibid) Western cultures and ideals, but also as a way of “transplanting Europe beyond its borders” (Siewierski, 2007: 500). In the essay *Utopia and Anthropophagy: Europe Beyond its Frontiers*, Henryk Siewierski elaborates on the movement:

... anthropophagy may also serve as a model of much more complex intercultural relations where foreign values are not seen as mere objects of consumption but are assimilated in an attempt to ‘subvert their meanings, destroy their hierarchy, escape their oppressive forces and transfigure their nihilistic energies into a source of vitality’. (2007: 507)

The structure existed as a large tent-like dome (fig. 26) situated at the centre of the Drill Hall, with multiple arm-like passageways which extended as entry/exit points, was held up by “wooden ribs” (Johnson, 2009) which seemed like a prehistoric dinosaur skeleton. Translucent pale-yellow, blue, and pink lycra fabric had been stretched across the wooden bones like skin (fig.27 ), giving the feel of “swelling walls” (Wilkin, 2009: 483) encapsulating the installation. Within areas of the installation, the walls contained multitudes of tactile orifices (fig.28 )made from the varying coloured and translucent lycra material, and dozens of tubes and sacs filled with aromatic spices (including turmeric, clove, cumin, black pepper, and ginger) hover and floated above (ibid) (fig.29) . Elsewhere are various interactive spaces, one a “circular pool filled with balls” (fig. 30), and the other an “enormous purple pillow” (Johnson, 2009) (fig. 31).

Engulfed in Neto’s anthropomorphic structure, one enters a new and foreign world filled with unusual and interactive experiences. As participants entered *Anthropodino* (2009), they seemed

to be devoured and consumed by the carnivorous prehistoric body, linking to the concept of anthropophagy. The male artist's use of materials such as pantyhose, lycra materials, and spices, to add to this new world by subverting Western assumptions about fabric and material work being 'feminine'. Similarly, my exhibition makes use of tactile and interactive elements to create an experiential space. My choice of medium, fabric, is used to explore the meaningful and embodied experience of needlework, but also deconstructs "sedimented and uncritical feminized assumptions regarding women and their needle" (Goggin, 2009:3). My rough and almost violent handling of the fabric contrasts the stereotypical associations with needlework and fabric art.

To create my installation, I use a combination of needle, thread, sewing machine, as well as a heat gun, wire, and hot glue gun. Comparatively, the tools I make use of could all be explained as gendered tools: the needle, thread etc. as 'feminine' tools and the heat gun and wire etc. as commonly associated with masculinity and 'men's work'. The method of burning and melting the fabric (and mimicking the effects of bulimia) is almost a violent and destructive act that subverts the idea of fabric and needlework as a 'soft craft' and common gendered assumptions about eating disorders.



Fig. 24: Ernesto Neto, *Anthropodino* (2009), sculptural installation, mixed media, 36m x 54m, photography by James Ewing courtesy of Park Avenue Armory.



Fig. 25: Ernesto Neto, *Anthropodino* (2009), sculptural installation (detail of dome), mixed media, dimensions variable, photography by James Ewing courtesy of Park Avenue Armory.



Fig. 26: Ernesto Neto, *Anthropodino* (2009), sculptural installation (detail of wooden sculpture), mixed media, dimensions variable, photography by James Ewing courtesy of Park Avenue Armory.



Fig. 27: Ernesto Neto, *Anthropodino* (2009), sculptural installation (detail of orifice), mixed media, dimensions variable, photography by James Ewing courtesy of Park Avenue Armory



Fig. 28: Ernesto Neto, *Anthropodino* (2009), sculptural installation (detail of spice sacs), mixed media, dimensions variable, photography by James Ewing courtesy of Park Avenue Armory.



Fig. 29: Ernesto Neto, *Anthropodino* (2009), sculptural installation (detail of ball pit), mixed media, dimensions variable, photography by C-Monster.

## Conclusion

The impetus to present my practical submission as the inside of a body came from my understanding of bulimia as a deeply physical and internal experience. After years of being bulimic, one develops a hyper awareness of one's body, its functioning's, and how to manipulate it. In the first chapter of this thesis, I looked at the idea that bulimic patients inhabit what Squire describes as a "profoundly lived body" (2003: 23). I have translated some of my experiences with bulimia into 'abject art' through my depiction of "flesh", "viscera" and "bodily fluids" (Arya, 2014:85). In the essay *Obscene, Abject, Traumatic*, Hal Foster identifies two main reasons for artists adopting concepts of the abject:

The first is to identify with the abject, to approach it somehow –to probe the wound of trauma, to touch the obscene object-gaze of the real. The second is to represent the condition of abjection in order to provoke its operation – to catch abjection in the act, to make it reflexive, even repellent in its own right. (1996:116)

My art practice has taken the shape of the former pursuit: "to probe a wound of trauma" (ibid). The process of materialising and conceptualising my experience with bulimia has been a difficult but therapeutic one. While the decision to centre my practice as research around my experience has required me to share something I previously fought so hard to hide, it has also helped me to acknowledge, and come to terms with, the many factors that contributed to my experience. Moore states that the "making of self" (2011: 13) and the "making of social relations" (ibid) requires that one be oneself and simultaneously stand beside oneself. Creating *In my Flesh*, allowed me to externalise my own battle with bulimia, and provided a way for me to step out of these deeply personal memories and look at them from a different perspective.

*In My Flesh* makes use of various sounds, textures, and in some instances smells, in order to create an immersive and interactive experience that highlights the sensory experience of bulimia. Participants are led through the exhibition as if on a journey, leading from one cavity to the next and experiencing different textures and sounds along the way. I have deliberately referred to the audience and exhibition-goers who may experience my installation as 'participants' throughout this document. The word 'participant' indicates that one actively engages, and its use in this instance suggests that the movement of bodies in and out of the installation are integral to its concept and meaning. In the essay *Strategies of Interactive Art*,

Ryszard W. Kluszczyński explains that interactive art is never fully completed by the artist themselves. He states:

Regardless of what shape the final product of an artist's activity takes on, an interactive piece of art finds its real, final formation only as a result of participative behavior of the audience. (2010: 2)

As mentioned in Chapter 2: *Architecture of The Body*, participants move and interact with the installation and in doing so they mirror the process of bingeing and purging food. This inclusion and participation in the process and movement of bulimia situates the audience right at the messy center of my experience. The decision to create an interactive and multi sensory space was made in an effort to create a unique and different materialisation of the disorder, which is usually depicted through purely visual methods.

*Do You Feel Like I Do? A Study of Spontaneous and Deliberate Emotion Sharing and Understanding Between Artists and Perceivers of Installation Art* describes art installation and art practice as a “conduit for a shared experience” (Pelowski et al., 2018: 1). Experience and emotion are shared in art through the use of “higher level metaphor or conceptual approaches” (Pelowski, et al., 2018: 2) which evoke and mirror the emotions felt by the artist during a particular memory. *In My Flesh* makes use of two significant materials as symbols and metaphors for my experience with bulimia: architecture and fabric. Not only are these mediums significant within my own story, they are also relatable and easily recognizable. My use of these two familiar mediums, creates understanding and familiarity between participants and the artwork.

I consider *The Fine Art Sculpture and Painting Building* to be a significant space in my experience with bulimia. As a building I frequented during this time, my memories can be traced and read along the walls, floors, and architectural surfaces of the space. Pallasmaa reiterates the link between architecture and the body:

I experience myself in the city, and the city exists through my embodied experience. The city and my body supplement and define each other. I dwell in the city and the city dwells in me. (2012: 43)

In order to contextualise my experience of bulimia within the space, I treat the building as a metaphor for the body. *In My Flesh* makes use of the anatomical features of the space as the architectural canvas for my installation. I have allowed the architectural features of the space to determine the placement of each constructed body part, and to dictate the flow of the exhibition. The sculptural pieces that make up my installation have been named according to

the individual body part and its placement within the architectural space. The architectural surfaces of the space are clothed and draped in my experience with bulimia.

The fabric that has come to cover and hide the architectural surface has similarly been treated like a part of the body: skin. The 'skin' stretches across and envelops the skeletal structure of the body/building. The use of fabric as the primary medium used to construct my installation was not only made because of its likeness to skin, but also because I see it as an incredibly relatable material. Attfield acknowledges cloth/fabric as "the most intimate of thing-types" that frequently surrounds and touches the body (2000: 122). The nature of bulimia as hidden and secretive makes it hard for those who haven't experienced it personally to fully understand it. I have incorporated fabric as a way to encourage participants' understanding of the disorder.

Fabric has the ability to cover and conceal the body which relates to the very secretive and hidden nature of this disorder. The manipulation of the material using heat mirrors the burning and perforating effects of frequent bingeing and purging, and the use of a concoction of colour and pigments to dye the fabric, alludes to the relationship a bulimic would have with the consumption of food. Like the architectural spaces, the handling of fabric leaves corporeal and invisible traces that embed themselves between its threads. Participants who enter and experience the exhibition will leave their own marks and interpretations within the space, while also engaging with the very essence of my own body that has been left throughout, constituting it as *art-in-the-flesh*.

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